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CONFIRMATION NO. 3190

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<b>APPLICANTS</b> Iacob Mathiesen, Olso, NORWAY; Torunn Tjelle, Olso, NORWAY; Knut Arvid Sorensen Rekdahl, Tamasen, NORWAY; Bjorn David-Andersen, Olso, NORWAY;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 0215529.9 07/04/2002 UNITED KINGDOM 0215523.2 07/04/2002				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/29/2003</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NORWAY	<b>SHEETS DRAWING</b> 17	<b>TOTAL CLAIMS</b> 22
				<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 35938				
<b>TITLE</b> ELECTROPORATION DEVICE AND INJECTION APPARATUS				
<b>FILING FEE RECEIVED</b> 1057	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	